FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION D,

SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL

OMB Number: 3235-0076

Expires: May 31, 2005

Estimated average burden
hours per response: 16.00

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SEC USE ONLY

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SEC USE ONLY								
Prefix		Serial						
DATE RECEIVED								

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	dment and name has changed, and indicate change.) unities Fund, LLC: Limited Liability Company Unities	nits
Filing Under (Check box(es) that apply):	Rule 504 □ Rule 505 ☑ Rule 506 □	Section 4(6) ULOE
Type of Filing: ☐ New Filing ☑ Ame	ndment	
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the	issuer	
Name of Issuer (☐ check if this is an amen	dment and name has changed, and indicate change.)	1881 1181 1811 8811 8811 8811 8811 811
Goldman Sachs Global Equity Opportu	inities Fund, LLC	04020338
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (including Area Code)
32 Old Slip, New York, New York 100	05	(212) 902-1000
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business		
To operate as a private investment fund	d.	
Type of Business Organization		- PROCESOE
□ corporation	☐ limited partnership, already formed	d other (please specify):
☐ business trust	☐ limited partnership, to be formed	Limited Liability Company MAR 22 2004
Actual or Estimated Date of Incorporation or	Organization: Month Year 0 3	THOMSON Actual Estimated FINANCIAL

GENERAL INSTRUCTIONS

Jurisdiction of Incorporation or Organization:

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

(Enter two-letter U.S. Postal Service abbreviation for

State: CN for Canada; FN for other foreign jurisdiction)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA								
2. Enter the information requested for the following:								
* Each promoter of the issuer, if the issuer has been organized within the past five years;								
* Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;								
* Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and								
* Each general and managing partner of partnership issuers.								
Check Box(es) that Apply: ☑ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner								
Full Name (Last name first, if individual)								
Goldman, Sachs & Co.								
Business or Residence Address (Number and Street, City, State, Zip Code)								
85 Broad Street, New York, New York 10004								
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner								
Full Name (Last name first, if individual)								
The Goldman Sachs Group, Inc.								
Business or Residence Address (Number and Street, City, State, Zip Code) 85 Broad Street, New York, New York 10004								
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer* ☐ Director ☐ General and/or *of the Issuer's Investment Manager Managing Partner								
Full Name (Last name first, if individual)								
Litterman, Robert B.								
Business or Residence Address (Number and Street, City, State, Zip Code)								
32 Old Slip, New York, New York 10005								
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer* ☐ Director ☐ General and/or *of the Issuer's Investment Manager Managing Partner								
Full Name (Last name first, if individual) Jones, Robert C.								
Business or Residence Address (Number and Street, City, State, Zip Code)								
32 Old Slip, New York, New York 10005								
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer* ☐ Director ☐ General and/or *of the Issuer's Investment Manager Managing Partner								
Full Name (Last name first, if individual)								
Mulvihill, Donald J.								
Business or Residence Address (Number and Street, City, State, Zip Code)								
32 Old Slip, New York, New York 10005								
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer* ☐ Director ☐ General and/or *of the Issuer's Investment Manager Managing Partner								
Full Name (Last name first, if individual) Lane, Eric								
Business or Residence Address (Number and Street, City, State, Zip Code)								
One New York Plaza, New York, New York 10004								
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner								
Full Name (Last name first, if individual)								
Business or Residence Address (Number and Street, City, State, Zip Code)								
(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)								

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				B. INI	FORMAT	ION ABO	UT OFFI	ERING				
											Yes	No
1. Has the	e issuer soic	l, or does th			o non-accre in Appendi			_				Ø
2 What i	e the minim	um invectm				·		inder obor	J.			
2. What is the minimum investment that will be accepted from any individual?								00,000*				
* The Issuer may accept subscriptions for lesser amounts at the discretion of the Managing Member. 3. Does the offering permit joint ownership of a single unit?								••••••	Yes ☑	No		
commi If a per or state	ssion or sin rson to be li es, list the n	nilar remune sted is an as ame of the l	eration for s ssociated pe broker or de	solicitation or age ealer. If mo	ho has been of purchase of a broke ore than five for that broken to that broken been done that broken been been been that broken been been been been been been been b	rs in connect er or dealer (5) person	ction with sa registered v s to be liste	ales of secu with the SE	rities in the C and/or wi	offering. th a state		
Full Name	(Last name	first, if ind	ividual)									
Goldman,	Sachs & C	Co.										
Business of	r Residence	Address (N	Number and	Street, City	y, State, Zip	Code)					<u>-</u>	
85 Broad	Street, Nev	York, Nev	w York 10	004								
Name of A	Associated B	Broker or De	ealer	···								
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ruii Name	(Last name	e nrst, ir ind	ividuai)									
Business of	or Residence	e Address (N	Number and	Street, City	y, State, Zip	Code)						
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Name of A	Associated E	Broker or De	ealer									
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Full Name	(Last name	e first, if ind	lividual)									
Business of	or Residence	e Address (î	Number and	Street, City	y, State, Zip	Code)						
Name of A	Associated F	Broker or De	ealer	·	· · · · · · · · · · · · · · · · · · ·			······································	- A			
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[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

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C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\pi\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security		Aggregate Offering Price	Amount Already Sold
	Debt	\$	0	\$ 0
	Equity	\$	0	\$ 0
	☐ Common ☐ Preferred			
	Convertible Securities (including warrants)	\$_	00	\$ 0
	Partnership Interests	\$	00	\$
	Other (Specify Limited Liability Company Units)			\$ 108,100,000
	Total	\$	108,100,000	\$ 108,100,000
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		N. I	Aggregate
			Number Investors	Dollar Amount of Purchases
	Accredited Investors		76	\$ 108,100,000
	Non-accredited Investors		0	\$ 0
	Total (for filings under Rule 504 only)	_	N/A	\$ N/A
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		Type of	Dollar Amount
	Type of offering		Security	Sold
	Rule 505		N/A	\$
	Regulation A	_	N/A	\$
-	Rule 504		<u>N/A</u>	\$
	Total		N/A	\$ N/A
tl tl	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of the expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees			\$ 0
	Printing and Engraving Costs.			\$ 0
	Legal Fees		\square	\$ 328,322
	Accounting Fees			\$ 0
	Engineering Fees			\$ 0
	Sales Commissions (specify finders' fees separately)		図	\$ 324,300
	Other Expenses (identify)			\$ 0
	Total		紐	\$ 652,622

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VIII	C. OFFERING PRICE, NUMBER OF INVESTORS, EXI	PENS	ES A	AND USE OF PE	ROCE	EDS	
	b. Enter the difference between the aggregate offering price given in response to - Question 1 and total expenses furnished in response to Part C - Question 4.a difference is the "adjusted gross proceeds to the issuer."	ı. Thi	s		\$_		107,447,378
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or precious to be used for each of the purposes shown. If the amount for any purpose is not furnish an estimate and check the box to the left of the estimate. The total payments listed must equal the adjusted gross proceeds to the issuer set forth in reto Part C - Question 4.b. above.	knowr of th	ı, e				
				Payments to Officers, Directors, & Affiliates			Payments To Others
	Salaries and Fees		\$_	0		\$_	0
	Purchase of real estate		\$_	0		\$_	0
	Purchase, rental or leasing and installation of machinery and equipment		\$_	0_		\$_	0
	Construction or leasing of plant buildings and facilities		\$	0		\$	0
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		\$	0		\$	0
	Repayment of indebtedness		\$	0		\$	0
	Working capital		\$	0		\$	0
	Other (specify): Investment Capital	_	* - \$	0		* - \$	107,447,378
	Column Totals	_	\$_	0	_ ☑	\$ <u>_</u>	107,447,378
	Total Payments Listed (column totals added)			函 \$	107,4	47,37	8
gara Table	D. FEDERAL SIGNATU	RE -	M. W	Andrew States	- ₹.¥+ **		
fo	the issuer has duly caused this notice to be signed by the undersigned duly authorallowing signature constitutes an undertaking by the issuer to furnish to the U.S. Sees staff, the information furnished by the issuer to any non-accredited investor pursual	urities	and	Exchange Commis	sion, uj		
3 0	ner (Print or Type) Idman Sachs Global Equity Opportunities and, LLC	- - V		Date March <u>15</u> , 200	4		
,	me of Signer (Print or Type) Title of Signer (Print or Type)						
1	Hexander M. Cooper Assistant Secreta	7					
	•	/					

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).